

## Fill in this information to identify the case:

Debtor name CWI Cherokee LF LLC

United States Bankruptcy Court for the: Northern District of Georgia  
(State)

Case number (if known): 23-52262-sms

☒ Check if this is an amended filing

## Official Form 207

## Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

## 1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/23 to Filing date  
MM / DD / YYYY

☒ Operating a business  
☐ Other \_\_\_\_\_

\$ 1,622,124

For prior year:

From 01/01/22 to 12/31/22  
MM / DD / YYYY

☒ Operating a business  
☐ Other \_\_\_\_\_

\$ 9,108,926

For the year before that:

From 01/01/21 to 12/31/21  
MM / DD / YYYY

☒ Operating a business  
☐ Other \_\_\_\_\_

\$ 8,053,045

## 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From NA to Filing date  
MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For prior year:

From 01/01/22 to 12/31/22  
MM / DD / YYYY

Insurance Settlement

\$ 125,000

For the year before that:

From 01/01/21 to 12/31/21  
MM / DD / YYYY

Insurance Settlement

\$ 95,000

Debtor

CWI Cherokee LF LLC

Name

Case number (if known) 23-52262-sms

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Please see attached sheets for all transfers Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Steve Witmer Insider's name 3284 Northside Parkway, Suite 600 Street Atlanta GA 30327 City State ZIP Code	_____	\$ Estimated \$240,000	Management
Relationship to debtor _____			
4.2. Insider's name Street City State ZIP Code	_____	\$ _____	
Relationship to debtor _____			

**Form 207 (Statement of Financial Affairs), Part 2, Section 3**

**3.1 Caterpillar Financial Services (26,282.60)**

P.O. Box 730681  
Dalles, Texas 75373  
Vendor

**3.2 Alabama Dept. of Revenue (70,519.17)**

50 N. Ripley Street  
Montgomery, Alabama 36130  
Taxes

**3.3 Atomic Transportation (398,759.07)**

Accounting Offices  
7105 Gault Ave. N.  
Fort Payne, Alabama 35967  
Vendor

Corporate Headquarters  
1301 Riverfront Parkway  
Chattanooga, TN 37402

**3.4 Auto-Owners Insurance (8,160.71)**

Corporate Address  
6101 Anacapri BLVD.  
Lansing, MI 48917  
Insurance

**3.5 Blue Cross Blue Shield of Alabama (42,534.84)**

Payment Processing  
P.O. Box 360037  
Birmingham, Alabama 35236-0037  
Insurance

Corporate Headquarters  
450 Riverchase Parkway East  
Birmingham, Alabama 35244

**3.6 Blue Vine (27,957.66)**

Corporate Headquarters  
401 Warren Street  
Redwood City, CA 94063

Vendor

**3.7 Caterpillar Financial (34,374.15)**

P.O. Box 730681  
Dallas, TX 75373

Corporate Headquarters  
2120 West End Avenue  
Nashville, TN 37203

Vendor

**3.8 Clifton Larson Allen LLC (8,333.50)**

P.O. Box 740863  
Atlanta, GA 30374-0863

3575 Piedmont Road NE  
Building 15, Suite 1550  
Atlanta, GA 30305

Services account

**3.9 CWI Transfer HSV (24,000.00)**

3284 Northside Parkway  
Suite 600  
Atlanta, GA 30327  
Lease

**3.10 CWI Enterprises (177,471.57)**

3284 Northside Parkway  
Suite 600  
Atlanta, GA 30327  
Note

**3.11 Evergreen Environmental (252,738.00)**

111 Northway Road, Suite D  
Columbia, SC 29201  
Vendor

**3.12 Fundamental (49,293.26)**

100 Garden City Plaza  
Suite 410  
Garden City, New York 11530

Working Capital

**3.13 ISCO Industries, Inc. (8,348.43)**

1974 Solutions Center  
Chicago, IL 60677-1009

Corporate Headquarters  
100 Witherspoon Street  
2 West  
Louisville, KY 40202

Vendor

**3.14 JLW Contracting LLC (74,500.00)**

2310 Bennett Road  
Jasper, AL 35503  
Vendor

**3.15 Mid-South Septic (124,363.50)**

11284 Gulf Stream Road  
Arlington, TN 38002  
Leachate disposal

**3.16 P & F Industrial Enterprises (63,714.70)**

1140 4<sup>th</sup> Street  
Cherokee, AL 35616  
Royalty Payments

**3.17 SEAM Financial, LLC (8,921.64)**

(Premium Finance)  
807 W. HWY 50 Ste. 4, P.O. Box 1506  
O'Fallon, IL 62269  
Insurance

**3.18 Regions Bank (546,822.70)**

Corporate Trust Operations  
250 Riverchase Parkway, E.  
4<sup>th</sup> Floor  
Birmingham, AL 35244

Revenue Account

**3.19 Stephen E. Witmer** (128,786.64)

3284 Northside Parkway  
Suite 600  
Atlanta, GA 30327  
Management Fees

**3.20 Sibley Oil** (8,269.80)

1070 Tennessee Street  
Courtland, AL 35618  
Fuel

**3.21 Schreeder Wheeler Flint, LLP** (75,000.00)

1100 Peachtree Street NE  
Suite 800  
Atlanta, GA 30309  
Legal Services

**3.22 Tanner Guin** (10,000.00)

2711 University Blvd.  
Suite 201  
Tuscaloosa, AL 35401  
Legal

**3.23 Thompson Tractor Co., Inc.** (24,226.50)

P.O. Box 934005  
Atlanta, GA 31193-4005  
Equipment Repair and Rental

**3.24 Vulcan** (13,395.70)

23314 HWY 72  
Tuscumbia, AL 35674  
Stone

**3.25 Waste Connections (347,467.88)**

3 Waterway Square PL

The Woodlands, TX 77380

MSW Disposal

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 Name

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____ _____ _____	\$ _____ _____ _____
5.2. Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____ _____ _____	\$ _____ _____ _____

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____ _____ _____	\$ _____ _____ _____
Last 4 digits of account number: XXXX- ____ _			

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Solid Waste Disposal Authorities v. CWI Cherokee LF, LLC, and Stephen E. Witmer  Case number 20-CV-2023-900033.00		Circuit Court of Colbert County, Alabama Name 201 N Main Street Street  Tuscumbia AL 35674 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Cherokee Industrial Landfill Permit No. 17-10  Case number 23-037-SW		Alabama Department of Environmental Management Name 1400 Coliseum Blvd Street  Montgomery AL 36110 City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded



7.3

Valicor Environmental Services v. CWI Cherokee LF LLC

Case No. 20-cv-2023-900029.00,

Circuit Court of Colbert County, Alabama, 201 N. Main Street, Tuscumbia, AL 35674

Nature: Suit on account

Status: Pending

Debtor

CWI Cherokee LF LLC

Name

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**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Custodian's name and address	Description of the property	Value
Jeffrey L. Claunch Custodian's name 250 Commerce Street, 3rd Floor Street	Landfill	\$
Montgomery AL 36104 City State ZIP Code	Case title Solid Waste Disposal Authorities v. CWI Cherokee LF, LLC, and Stephen E. Witmer Case number 20-CV-2023-900033.00 Date of order or assignment March 1, 2023, but hearing on March 8 to make order permanent	Court name and address Circuit Court of Colbert County, Alabama Name 201 N Main Street Street Tuscumbia AL 35674 City State ZIP Code

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Willie Green Recreation Center Recipient's name 609 S East Street Street Tuscumbia AL 35674 City State ZIP Code Recipient's relationship to debtor Donation	Donation for Youth Football League		\$ 5000
9.2. Curtis Roberts Recipient's name Street City State ZIP Code Recipient's relationship to debtor Employee	2017 2500 Denali Truck	09/01/22	\$ 5000

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
			\$

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**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Schreeder, Wheeler & Flint LLP  Address 1100 Peachtree Street Street Suite 800 Atlanta GA 30309 City State ZIP Code  Email or website address swflp.com  Who made the payment, if not debtor? NA		March 7, 2023	\$ 75,000

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	  Address Street  City State ZIP Code  Email or website address  Who made the payment, if not debtor?			\$

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
 Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$
Trustee			

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 Name

### 13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b> _____ Street _____ _____ City State ZIP Code			
<b>Relationship to debtor</b> _____			
13.2. _____	_____	_____	\$ _____
<b>Address</b> _____ Street _____ _____ City State ZIP Code			
<b>Relationship to debtor</b> _____			

### Part 7: Previous Locations

#### 14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy	
14.1. _____ Street _____ _____ City State ZIP Code	From _____	To _____
14.2. _____ Street _____ _____ City State ZIP Code	From _____	To _____

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**Part 8: Health Care Bankruptcies**

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.  
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. Facility name _____  Street _____  City _____ State _____ ZIP Code _____	_____ _____  <b>Location where patient records are maintained</b> (if different from facility address). If electronic, identify any service provider. _____ _____	_____  <b>How are records kept?</b>  Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.2. Facility name _____  Street _____  City _____ State _____ ZIP Code _____	_____ _____  <b>Location where patient records are maintained</b> (if different from facility address). If electronic, identify any service provider. _____ _____	_____  <b>How are records kept?</b>  Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.  
☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_  
Does the debtor have a privacy policy about that information?  
☐ No  
☐ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.  
Yes. Does the debtor serve as plan administrator?  
☐ No. Go to Part 10.  
☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: ____ - ____ - ____

Has the plan been terminated?

- ☐ No  
☐ Yes

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**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ <b>Address</b> _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ <b>Address</b> _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

CWI Cherokee LF LLC

Name

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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City	State	ZIP Code	

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

☐ No

☒ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Alabama Department of Environmental Management	Consent Order	<input type="checkbox"/> Pending
Order Nos. 22-110-CWP; 23-037-SW	Name 1400 Coliseum Blvd		<input type="checkbox"/> On appeal
	Street		<input checked="" type="checkbox"/> Concluded
	Montgomery AL 36110		
	City State ZIP Code		

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City	City		
State	State		
ZIP Code	ZIP Code		

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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. <u>CWI Alabama LLC</u> <small>Name</small> <u>3284 Northside Parkway, Suite 600</u> <small>Street</small>  <u>Atlanta</u> <u>GA</u> <u>30327</u> <small>City State ZIP Code</small>	_____ _____ _____	EIN: <u>8</u> <u>2</u> - <u>1</u> <u>9</u> <u>7</u> <u>2</u> <u>0</u> <u>8</u> <u>6</u> <b>Dates business existed</b> From _____ To <u>Present</u>
25.2. _____ <small>Name</small> _____ <small>Street</small> _____ _____ <small>City State ZIP Code</small>	_____ _____ _____	EIN: _____ - _____ <b>Dates business existed</b> From _____ To _____
25.3. _____ <small>Name</small> _____ <small>Street</small> _____ _____ <small>City State ZIP Code</small>	_____ _____ _____	EIN: _____ - _____ <b>Dates business existed</b> From _____ To _____



Debtor

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**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Dates of service
26a.1. Norton Underwood Name 102 N Main Street Street  Tuscumbia AL 35674 City State ZIP Code	From 6-23-2020 To 3-31-2022

Name and address	Dates of service
26a.2. CliftonLarsonAllen LLP Name 3575 Piedmont Road NE Street Suite 1550 Atlanta GA 30305 City State ZIP Code	From 4-1-2022 To Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Dates of service
26b.1. CliftonLarsonAllen LLP Name 3575 Piedmont Road NE Street Suite 1550 Atlanta GA 30305 City State ZIP Code	From _____ To _____

Name and address	Dates of service
26b.2. _____ Name _____ Street _____ _____ City State ZIP Code	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. CliftonLarsonAllen LLP Name 3575 Piedmont Road NE Street Suite 1550 Atlanta GA 30305 City State ZIP Code	_____ _____ _____

Debtor CWI Cherokee LF LLC Case number (if known) 23-52262-sms  
 Name

**Name and address**

**If any books of account and records are unavailable, explain why**

26c.2.

Name \_\_\_\_\_  
 Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

**Name and address**

26d.1.

Municipal Securities Rulemaking Board (MSRB)  
 Name \_\_\_\_\_  
 1300 I Street  
 Street \_\_\_\_\_  
 Suite 1000  
 Washington D.C. 20005  
 City State ZIP Code

**Name and address**

26d.2.

Rice Advisory  
 Name \_\_\_\_\_  
 250 Commerce Street  
 Street \_\_\_\_\_  
 3rd Floor  
 Montgomery AL 36104  
 City State ZIP Code

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No  
☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the inventory**

**Date of inventory**

**The dollar amount and basis (cost, market, or other basis) of each inventory**

\_\_\_\_\_ \$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name \_\_\_\_\_  
 Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

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Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name

Address

Position and nature of any interest

% of interest, if any

Steve Witmer

3284 Northside Parkway, Suite 600

CWI Alabama Member LLC

Manager

owns 100% of debtor

Witmer owns 60% of

CWI Alabama Member LLC

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☐ Yes. Identify below.

Name

Address

Position and nature of any interest

Period during which position or interest was held

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

30.1.

Steve Witmer

Estimated \$240,000

Management

Name

3284 Northside Parkway, Suite 600

Street

Atlanta

GA

30327

City

State

ZIP Code

Relationship to debtor

Debtor CWI Cherokee LF LLC  
Name

Case number (if known) 23-52262-sms

Name and address of recipient

30.2

Name

Street

City

State

ZIP Code

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: \_\_\_\_\_

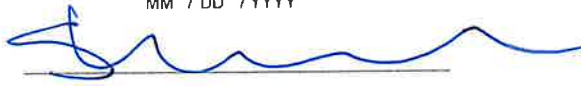
**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 4/20/2023  
MM / DD / YYYY



Printed name Stephen E. Witmer

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Manager of CWI Alabama Member, LLC, the Manager of Debtor

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☒ Yes

**Fill in this information to identify the case:**Debtor name CWI CHEROKEE LF LLCUnited States Bankruptcy Court for the: NORTHERN District of GEORGIA  
(State)Case number (if known): 23-52262-sms☒ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1:** Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

\$ \_\_\_\_\_

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. PNC BankChecking6 8 2 5

\$ 58,175.59

3.2. Regions BankChecking6 6 1 3

\$ 4,696.96

First Metro BankChecking7 3 4 4

12,959.71

**4. Other cash equivalents (Identify all)**4.1. Bond Funds (Regions Bank)

\$ 2,114,841.11

4.2. \_\_\_\_\_

\$ \_\_\_\_\_

**5. Total of Part 1****\$ 2,190,673**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2:** Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes. Fill in the information below.

**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. \_\_\_\_\_

\$ \_\_\_\_\_

7.2. \_\_\_\_\_

\$ \_\_\_\_\_

Debtor

CWI Cherokee LF LLC

Document

Page 22 of 55

Case number (if known) 23-52262-sms

Name

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. \_\_\_\_\_ \$ \_\_\_\_\_

8.2. \_\_\_\_\_ \$ \_\_\_\_\_

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ \_\_\_\_\_

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less:	<u>432,624</u>	-	<u>0</u>	= ..... →	\$ <u>432,624</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>680,174.40</u>	-	<u>193,837</u>	= ..... →	\$ <u>486,337</u>
	face amount		doubtful or uncollectible accounts		

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 918,961**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_

14.2. \_\_\_\_\_ \$ \_\_\_\_\_

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. CWI ALABAMA LLC 100 %  \$ 137,720

15.2. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_

16.2. \_\_\_\_\_ \$ \_\_\_\_\_

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

**Part 5:** Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>19. Raw materials</b>				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>20. Work in progress</b>				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>21. Finished goods, including goods held for resale</b>				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>22. Other inventory or supplies</b>				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>23. Total of Part 5</b>				\$ _____
Add lines 19 through 22. Copy the total to line 84.				

**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
- ☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

**Part 6:** Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>28. Crops—either planted or harvested</b>			
_____	\$ _____	_____	\$ _____
<b>29. Farm animals</b> <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
<b>30. Farm machinery and equipment</b> (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
<b>31. Farm and fishing supplies, chemicals, and feed</b>			
_____	\$ _____	_____	\$ _____
<b>32. Other farming and fishing-related property not already listed in Part 6</b>			
_____	\$ _____	_____	\$ _____

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7:** Office furniture, fixtures, and equipment; and collectibles38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture</b>			
_____	\$ _____	_____	\$ _____
40. <b>Office fixtures</b>			
_____	\$ _____	_____	\$ _____
41. <b>Office equipment, including all computer equipment and communication systems equipment and software</b>			
_____	\$ 18,418	_____	\$ 18,418
42. <b>Collectibles</b> <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 18,418

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☒ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes



Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

**Part 8:** Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
<b>48. Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
<b>49. Aircraft and accessories</b>			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
<b>50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
mini excavator, D3 skid steer, CAT 826 compactor	\$ _____	_____	\$ 869,000
<b>51. Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.			\$ 869,000

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No
- ☒ Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

**Part 9:** Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 1750 Cane Creek Road, Cherokee, AL 35616	Landfill and adjacent property	\$ 6,661,039.40		\$ 6,661,039.40
55.2 2015 Missouri Street, Tuscumbia	Leasehold	\$ 0		\$
55.3 4583 Pryor Road, Madison, AL	Leasehold	\$ 12,600		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 6,661,039.40

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No
- ☒ Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

**Part 10:** Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$ 7,604,200.05		\$ 7,604,200.05
65. Goodwill	\$		\$

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ 7,604,200.05

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No  
☒ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No  
☒ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11:** All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes. Fill in the information below.

**Current value of  
debtor's interest**

71. Notes receivable

Description (include name of obligor)

CWI Intercompany loan

Total face amount

doubtful or uncollectible amount

= →

\$ 1,655,960.86

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

NA

Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
 Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
 Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

NA

\$ \_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Please see attached sheet. The current value of debtor's interest is listed here.

\$ 17,190,670

Nature of claim

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Tri Cities Solid Waste and Authority Development

\$ 2,000,000

Nature of claim

Counterclaim

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\$ \_\_\_\_\_

77. Other property of any kind not already listed Examples: Season tickets, country club membership

NPDES Permit

\$ unknown

\$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$20,984,301

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

CWI Cherokee LF, LLC

23-52262-sms

Schedule A/B, Part 11, Section 74:

Tyco, 3M, DuPont, ChemGuard

Nature of claim: Tort claim (Negligence, Trespass, product liability)

Amount requested: \$16,709,670

Norton Underwood, P.C.

Nature of claim: Negligence; Breach of Fiduciary Duty

Amount requested: \$200,000

Rice Advisory, LLC

Nature of claim: Intentional interference with contract; breach of fiduciary duty Amount requested: \$200,000

Tri Cities Solid Waste and Development Authority, City of Muscle Shoals, City of Tuscumbia, and City of Sheffield

Nature of claim: breach of contract, tortious interference with business relationship, conspiracy, fraud

Amount requested: not less than \$2,000,000 (recorded in Answer #75)

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

23-52262-sms

## Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	\$ 2,190,673	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$ _____	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	\$ 918,961	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	\$ _____	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$ _____	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	\$ _____	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	\$ 18,418	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$ 869,000	
88. <b>Real property.</b> <i>Copy line 56, Part 9.</i> ..... →		\$ 6,661,039
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	\$ 7,604,200	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ \$ 20,984,301	
91. <b>Total.</b> Add lines 80 through 90 for each column..... 91a.	\$ 32,585,553	+ 91b. \$ 6,661,039
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92. ....		\$39,246,592

## Fill in this information to identify the case:

Debtor name CWI Cherokee LF LLC  
 United States Bankruptcy Court for the: Northern District of Georgia  
 (State)  
 Case number (if known): 23-52262-sms

☒ Check if this is an amended filing

## Official Form 206D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

## Part 1: List Creditors Who Have Secured Claims

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A  
Amount of claim  
Do not deduct the value of collateral.

Column B  
Value of collateral that supports this claim

2.1	Creditor's name	Describe debtor's property that is subject to a lien	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
	Caterpillar Financial Services	Mini excavator, D3 skid steer, and D6 LGP dozer	\$ 146,667	\$ 269,00
	Creditor's mailing address P.O. Box 730681 Dallas, TX 75373			
	Creditor's email address, if known			
	Date debt was incurred			
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.	Describe the lien note Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.2	Creditor's name UMB	Describe debtor's property that is subject to a lien Disposal agreement between debtor and the Solid Waste Disposal Authority of the Cities of Muscle Shoals, Sheffield, and Tuscumbia, Alabama	\$ 18,100,000	\$ 30,000,000
	Creditor's mailing address c/o Beth Brownstein, Arent Fox Schiff LLP 1301 Avenue of the Americas, 42nd Floor New York, NY 10019			
	Creditor's email address, if known beth.brownstein@arentfox.com			
	Date debt was incurred June 23, 2020			
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines	Describe the lien Contract Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
3.	Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.		\$ 18,770,667	

Debtor

CWI Cherokee LF LLC  
Name

Case number (if known) 23-52262-sms

## Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>23</b> <b>Creditor's name</b> Shoals SWDA <b>Creditor's mailing address</b> 2015 Missouri Street Tuscumbia, AL 35674 <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____ <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> Equipment \$ 524,000 \$ 600,000 _____ <b>Describe the lien</b> _____ <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
--	---

<b>2.</b> <b>Creditor's name</b> _____ <b>Creditor's mailing address</b> _____ _____ <b>Creditor's email address, if known</b> _____ <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____ <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> _____ \$ _____ \$ _____ _____ <b>Describe the lien</b> _____ <b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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[illegible]



## Fill in this information to identify the case:

Debtor CWI Cherokee LF LLC

United States Bankruptcy Court for the: Northern District of GA  
(State)

Case number 23-52262-sms  
(If known)

☐ Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

## Part 1: List All Creditors with PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

## 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

## 2.1 Priority creditor's name and mailing address

Alabama Department of Labor

649 Monroe Street

Montgomery, AL 36131

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

As of the petition filing date, the claim is: \$

Total claim

Unknown

Priority amount

\$

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☒ No
- ☐ Yes

## 2.2 Priority creditor's name and mailing address

Alabama Department of Revenue

50 North Ripley Street

Montgomery, AL 36132

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

As of the petition filing date, the claim is: \$

60,850.04

\$

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☒ No
- ☐ Yes

## 2.3 Priority creditor's name and mailing address

Alabama Department of Revenue  
Business Privilege Tax Section

P.O. Box 327320, Montgomery, AL 36124

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

As of the petition filing date, the claim is: \$

Unknown

\$

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☒ No
- ☐ Yes

## Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

## 2.4 Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 2.5 Priority creditor's name and mailing address

\$ Unknown \$ \_\_\_\_\_

City of Athens

P.O. Box 1089

Athens, AL 35612

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 26 Priority creditor's name and mailing address

\$ 17,291.53 \$ 14,358.85

Internal Revenue Service

Centralized Insolvency Operation

P.O. Box 7346, Philadelphia, PA 19101

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 2.7 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_ \$ \_\_\_\_\_

Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

## 2.8 Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 2.9 Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ 260.00

Tommy L. Oswalt, Revenue Commissioner

P.O.Box 741010

Tuscumbia, AL 35674

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 2.10 Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## 2.11 Priority creditor's name and mailing address

\$ Unknown \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.12 Priority creditor's name and mailing address

\$ Unknown

\$

United States Treasury

P.O. Box 742562

Cincinnati, OH 45280

Date or dates debt was incurred

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

2.13 Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

2.14 Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

2.15 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$

\$

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

**Part 2:** List All Creditors with NONPRIORITY Unsecured Claims

**3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> <u>10 Kings LLC</u> <u>80 West Wieuca Road NE, Suite 170</u> <u>Atlanta, GA 30342</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>note holder</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>200,000</u>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> <u>ADCO Pipe &amp; Supply, LLC</u> <u>4014 Florece Blvd</u> <u>Florence, AL 35634</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Landfill vendor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>9,615.27</u>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> <u>AT&amp;T</u> <u>c/o Business Bankruptcy</u> <u>Arlington, TX 76004</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Phone bills</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> <u>AJ Equity</u> <u>1648 61st Street</u> <u>Brooklyn, NY 11204</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Merchant Capital Advance</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>300,000</u>
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> <u>American Services, LLC</u> <u>2281 Stateline Road W</u> <u>Southaven, MS 38671</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Landfill vendor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>162,727</u>
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Anderson Trucking, LLC</u> <u>5505 McCaleb Drive</u> <u>Dora, AL 35062</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Hauling</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	<b>Nonpriority creditor's name and mailing address</b> <u>Andy's Wrecker Service</u>  <u>20850 Highway 72</u> <u>Tuscumbia, AL 35674</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  <b>Basis for the claim:</b> <u>Landfill vendor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>
3.8	<b>Nonpriority creditor's name and mailing address</b> <u>Apache Electrical Contractors Inc.</u>  <u>115 Ryland Ridge Circle, Unit 39</u> <u>Huntsville, AL 35811</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Landfill vendor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>
3.9	<b>Nonpriority creditor's name and mailing address</b> <u>Arnold's Truck Stop, Inc.</u>  <u>1460 Highway 20</u> <u>Tuscumbia, AL 35674</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Truck parts and fuel</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>621.05</u>
3.10	<b>Nonpriority creditor's name and mailing address</b> <u>Atomic Transport, LLC</u>  <u>P.O. Box 2548</u> <u>Chattanooga, TN 37409</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Landfill vendor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>134,330.40</u>
3.11	<b>Nonpriority creditor's name and mailing address</b> <u>Auto-Owners Insurance</u>  <u>P.O. Box 740312</u> <u>Cincinnati, OH 45274</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Insurance for Landfill Equipment</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12	<b>Nonpriority creditor's name and mailing address</b> <u>BT's Tires, Towing &amp; Roadside</u>  <u>19592 Piney Chapel Road</u>  <u>Athens, AL 35614</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  <b>Basis for the claim:</b> <u>Roadside Services</u>	\$ <u>Unknown</u>
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13	<b>Nonpriority creditor's name and mailing address</b> <u>Bill Cohen</u>  <u>3630 Peachtree Road, Suite 940</u>  <u>Atlanta, GA 30326</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>note holder</u>	\$ <u>300,000</u>
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	<b>Nonpriority creditor's name and mailing address</b> <u>Bluevine Capital Inc.</u>  <u>30 Montgomery Street, Suite 1400</u>  <u>Jersey City, NJ 07302</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Merchant Capital Advance</u>	\$ _____
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15	<b>Nonpriority creditor's name and mailing address</b> <u>Brickstone Fund</u>  <u>5314 16th Avenue, Suite 139</u>  <u>Brooklyn, NY 11204</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Merchant Capital Advance</u>	\$ <u>300,000</u>
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16	<b>Nonpriority creditor's name and mailing address</b> <u>Burr &amp; Forman LLP</u>  <u>P.O. Box 830719</u>  <u>Birmingham, AL 35283</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Legal fees</u>	\$ <u>87,809.25</u>
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

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Amount of claim

3.17	Nonpriority creditor's name and mailing address Byars Wright, Inc.  P.O. Box 1309  Jasper, AL 35501  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: Insurance Broker  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,012.51
3.18	Nonpriority creditor's name and mailing address CDG Engineering  P.O. Box 278  Andalusia, AL 36420  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Engineering fees  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 135,968.77
3.19	Nonpriority creditor's name and mailing address CT Corporation  P.O. Box 4349  Carol Stream, IL 60197  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Agent fees  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 201.96
3.20	Nonpriority creditor's name and mailing address      Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
3.21	Nonpriority creditor's name and mailing address Carolina Software  P.O. Box 3097  Wilmington, NC 28406  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Software maintenance  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 800.00



## Part 2: Additional Page

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Amount of claim

3.22	Nonpriority creditor's name and mailing address Cherokee Auto Parts  8430 Hwy 72 Cherokee, AL 35616  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Auto parts Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,261.81
3.23	Nonpriority creditor's name and mailing address Civil Group, LLC  919 E Avalon Avenue, Suite B Muscle Shoals, AL 35616  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Survey services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,200.00
3.24	Nonpriority creditor's name and mailing address CliftonLarsonAllen LLP  P.O. Box 740863 Atlanta, GA 30374  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Accounting services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 71,000
3.25	Nonpriority creditor's name and mailing address Comcast  P.O. Box 71211 Charlotte, NC 28272  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Cable and wifi Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 500.00
3.26	Nonpriority creditor's name and mailing address Corporate Billing, LLC  P.O. Box 830604, Department 100 Birmingham, AL 35283  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown

## Part 2: Additional Page

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Amount of claim

327	<p>Nonpriority creditor's name and mailing address</p> <p>Davis Services</p> <p>53400 Hawk Pride Mountain Road</p> <p>Tuscumbia, AL 35674</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 925.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Trucking Services</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
328	<p>Nonpriority creditor's name and mailing address</p> <p>Denali</p> <p>P.O. Box 740903</p> <p>Atlanta, GA 30374</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 138,900</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Leachate disposal</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
329	<p>Nonpriority creditor's name and mailing address</p> <p>Dentons Sirote P.C.</p> <p>P.O. Box 55509</p> <p>Birmingham, AL 35255</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 42,000</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Legal Services</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
330	<p>Nonpriority creditor's name and mailing address</p> <p>Derek Griffin</p> <p>80 W. Wieuca Road NE, Suite 170</p> <p>Atlanta, GA 30342</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 100,000</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Note holder</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
331	<p>Nonpriority creditor's name and mailing address</p> <p>Evergreen Environmental Partners</p> <p>300 Noble Hill Road</p> <p>Attalla, AL 35954</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 77,198.06</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Disposal services</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.32	<b>Nonpriority creditor's name and mailing address</b> Fundamental Capital SPE 100 Garden City Plaza, Suite 410 Garden City, NY 11530	<b>As of the petition filing date, the claim is:</b> \$ 58,000 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed <b>Basis for the claim:</b> Merchant Capital Advance <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	<b>Nonpriority creditor's name and mailing address</b> GT Michelli Co., Inc. 130 Brookhollow Esplanade Harahan, LA 70123	<b>As of the petition filing date, the claim is:</b> \$ 3,762.50 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> Scale services <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	<b>Nonpriority creditor's name and mailing address</b> Hines Tire and Service Center 419 Court Street Florence, AL 35630	<b>As of the petition filing date, the claim is:</b> \$ 124.80 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	<b>Nonpriority creditor's name and mailing address</b> Integrated Corporate Solutions, Inc. P.O. Box 443 Florence, AL 35631	<b>As of the petition filing date, the claim is:</b> \$ 1,573.33 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	<b>Nonpriority creditor's name and mailing address</b> J.T. Ray Company 450 Production Ave Madison, AL 35758	<b>As of the petition filing date, the claim is:</b> \$ 129.14 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> Repair services <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

3.37	<p>Nonpriority creditor's name and mailing address  <b>JLW Contracting LLC</b></p> <p>2310 Bennett Road  Jasper, AL 35503</p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 140,000</u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Site services</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.38	<p>Nonpriority creditor's name and mailing address  <b>James E. Alexander Land Surveying</b></p> <p>P.O. Box 160  Sheffield, AL 35660</p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 8,675</u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Survey services</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.39	<p>Nonpriority creditor's name and mailing address  <b>Leigh, King, Norton &amp; Underwood P.C.</b></p> <p>603 East 2nd Street  Sheffield, AL 35660</p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 1,062.50</u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accounting services</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.40	<p>Nonpriority creditor's name and mailing address  <b>Madison Mobile Storage, Inc.</b></p> <p>P.O. Box 2222  Decatur, AL 35609</p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 1,200</u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Storage fees</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.41	<p>Nonpriority creditor's name and mailing address  <b>Marshall Roberts</b></p> <p>80 W. Wieuca Road NE, Suite 170  Atlanta, GA 30342</p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 100,000</u>  <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Note holder</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.42	Nonpriority creditor's name and mailing address Mid South Septic  11284 Gulf Stream Road  Arlington, TN 38002  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: Leachate disposal  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 67,452
3.43	Nonpriority creditor's name and mailing address The McPherson Companies, Inc.  P.O. Box 11407  Birmingham, AL 35246  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Fuel services  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 82,056.04
3.44	Nonpriority creditor's name and mailing address OTR Mobile  2114 E Fairview Ave  Johnson City, TN 37601  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Internet  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 123.76
3.45	Nonpriority creditor's name and mailing address P&F Industrial Enterprises  1140 4th Street  Cherokee, AL 35616  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Royalty Payments  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 41,523.84
3.46	Nonpriority creditor's name and mailing address Phil Adams  Walker Building, 205 South Ninth Street  P.O. Box 36803  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Mediator services  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 22,000

Part 2: Additional Page

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Amount of claim

347	<p>Nonpriority creditor's name and mailing address  <u>Republic Services</u>    <u>P.O. Box 677839</u>  <u>Dallas, TX 75267</u></p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 106,344.53</u>  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Disposal services</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
348	<p>Nonpriority creditor's name and mailing address  <u>SEAM Financial LLC</u>    <u>P.O. Box 1506</u>  <u>O'Fallon, IL 62269</u></p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ Unknown</u>  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
349	<p>Nonpriority creditor's name and mailing address  <u>Todd Moreland</u>    <u>P.O. Box 3069</u>  <u>Chattanooga, TN 37409</u></p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 150,000</u>  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Electric services</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
350	<p>Nonpriority creditor's name and mailing address  <u>Thompson Tractor Co., Inc.</u>    <u>P.O. Box 934005</u>  <u>Atlanta, GA 31193</u></p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 186,000</u>  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
351	<p>Nonpriority creditor's name and mailing address  <u>TEC Cherokee Office</u>    <u>P.O. Box 23728</u>  <u>Jackson, MS 39225</u></p> <p>Date or dates debt was incurred _____  Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 143.26</u>  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Internet</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>

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## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.52	Nonpriority creditor's name and mailing address Terrain Technology, Inc.  2993 Heavenly Lane  Snellville, GA 30078  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>Engineering fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,000
3.53	Nonpriority creditor's name and mailing address United Site Services of MS, LLC  150 Pioneer Drive  Killen, AL 35645  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Dumpster services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,616.27
3.54	Nonpriority creditor's name and mailing address Valicor Environmental Services Department 77380 P.O. Box 77000 Huntsville, AL 35806  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Leachate disposal</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 76,147
3.55	Nonpriority creditor's name and mailing address Waste Connections P.O. Box 311 Walnut, MS 38683  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 12,000
3.56	Nonpriority creditor's name and mailing address Wayne Holt 3210 Hatch Blvd Sheffield, AL 35660  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Truck repair services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

357	Nonpriority creditor's name and mailing address Wes Shafto 1818 Avenue of Americas Monroe, LA 71201	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 200,000
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Note holder Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
358	Nonpriority creditor's name and mailing address CWI Alabama, LLC 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 194,525
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
359	Nonpriority creditor's name and mailing address Steve Witmer 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,253,737
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
360	Nonpriority creditor's name and mailing address CWI Enterprises, LLC 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 486,203
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
361	Nonpriority creditor's name and mailing address Athens Utilities PO Box 830200 Birmingham, AL 36283	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 883.25
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	



## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.____	<b>Nonpriority creditor's name and mailing address</b> Sheffield Utilities PO Box 580 Sheffield, AL 35060  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5359
3.____	<b>Nonpriority creditor's name and mailing address</b> Tuscumbia Utilities PO Box 269 Tuscumbia, AL 35674  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3.____	<b>Nonpriority creditor's name and mailing address</b> Walker County Circuit Clerk 1801 3rd Ave, Suite 205 Jasper, AL 35501  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3.____	<b>Nonpriority creditor's name and mailing address</b> Tri Cities/ Shoals Solid Waste Disposal Authority PO Box 408 Tuscumbia, AL 35674  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 20,273.84
3.____	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts		
5a. Total claims from Part 1	5a.	\$ 75,468.89
5b. Total claims from Part 2	5b. +	\$ 5,296,985.11
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 5,372,454

## Fill in this information to identify the case:

Debtor name CWI Cherokee LF LLC

United States Bankruptcy Court for the: Northern District of Georgia  
(State)

Case number (If known): 23-52262-sms Chapter 11

☒ Check if this is an amended filing

## Official Form 206G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest <u>Tri Cities Solid Waste and Development Authority</u> <u>Landfill lease</u>	<u>c/o Tim Leigh</u> <u>Leigh, King &amp; Associates, P.C.</u> <u>603 East 2nd Street</u> <u>Sheffield, AL 35660</u>
	State the term remaining <u>96 years, 3 months</u>	
	List the contract number of any government contract _____	
2.2	State what the contract or lease is for and the nature of the debtor's interest <u>Tri Cities Solid Waste and Development Authority</u> <u>Shoals Transfer Station</u>	<u>c/o Tim Leigh</u> <u>Leigh, King &amp; Associates, P.C.</u> <u>603 East 2nd Street</u> <u>Sheffield, AL 35660</u>
	State the term remaining <u>72 years, 3 months</u>	
	List the contract number of any government contract _____	
2.3	State what the contract or lease is for and the nature of the debtor's interest <u>Shoals Solid Waste and Development Authority</u> <u>Equipment Lease</u>	<u>c/o Tim Leigh</u> <u>Leigh, King &amp; Associates, P.C.</u> <u>603 East 2nd Street</u> <u>Sheffield, AL 35660</u>
	State the term remaining <u>0</u>	
	List the contract number of any government contract _____	
2.4	State what the contract or lease is for and the nature of the debtor's interest <u>Tri Cities Solid Waste and Development Authority</u> <u>Disposal Contract</u>	<u>c/o Tim Leigh</u> <u>Leigh, King &amp; Associates, P.C.</u> <u>603 East 2nd Street</u> <u>Sheffield, AL 35660</u>
	State the term remaining <u>96 years, 3 months</u>	
	List the contract number of any government contract _____	
2.5	State what the contract or lease is for and the nature of the debtor's interest <u>Royalty Agreement</u>	<u>P&amp;F Industrial Enterprises</u> <u>1140 4th Street, 35616</u> <u>Cherokee, AL 35616</u>
	State the term remaining _____	
	List the contract number of any government contract _____	

Debtor CWI Cherokee LF LLC Case number (if known) 23-52262-sms  
Name

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	
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Fill in this information to identify the case:

Debtor name CWI Cherokee LF LLC

United States Bankruptcy Court for the: Northern District of Georgia  
(State)

Case number (If known): 23-52262-sms

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>6,661,039</u>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>32,585,553</u>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>39,246,592</u>

Part 2: Summary of Liabilities

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>18,769,667</u>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>75,468.89</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+ \$ <u>5,296,985.11</u>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>24,142,121</u>

Fill in this information to identify the case and this filing:

Debtor Name CWI Cherokee LF LLC  
United States Bankruptcy Court for the: Northern District of Georgia  
Case number (if known): 23-52262-sms (State)

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 4/20/23  
MM / DD / YYYY

X

Signature of individual signing on behalf of debtor

Steve Witmer,

Printed name

Manager of CWI Alabama Member, LLC, Manager of Debtor

Position or relationship to debtor